

Soil Investigation

Soil Temperature Data Sheet

Study Site: _____

Name of Collector/Analyst/Recorder: _____

Date: _____

Soil Thermometer: Dial _____ Digital _____ Other _____

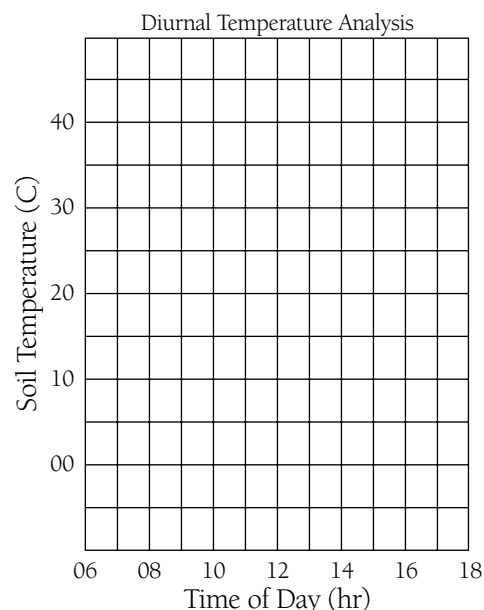
Has there been precipitation within the last 24 hours? Yes _____ No _____

Daily/Weekly Measurements

Sample No.	Time		Temperature	
	(hr)	(min)	5 cm (C)	10 cm (C)
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____

Diurnal/Cycle Measurements

Sample No.	Time		Temperature	
	(hr)	(min)	5 cm (C)	10 cm (C)
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____
5	_____	_____	_____	_____
6	_____	_____	_____	_____
7	_____	_____	_____	_____
8	_____	_____	_____	_____



Daily Metadata/Comments: _____
